Thailand

Epidemiological Fact Sheet

on HIV/AIDS
and sexually
transmitted
infections

2000 Update

Joint United Nations Programme on HIV/AIDS
UNAIDS
UNICEF • UNDP • UNFPA • UNDCP
UNESCO • WHO • WORLD BANK

World Health
Organization

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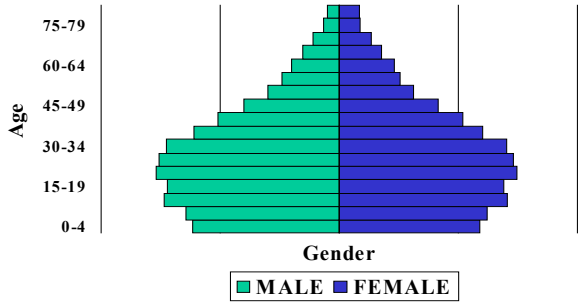
Country Information

Population pyramid, 1999



Indicators	Year	Estimate	Source
Total Population (thousands)	*1999*	60,856	UNPOP
Population Aged 15-49 (thousands)	*1999*	35,598	UNPOP
Annual Population Growth	*1990-1998*	1.0	UNPOP
% of Population Urbanized	*1998*	21	UNPOP
Average Annual Growth Rate of Urban Population	*1990-1998*	2.0	UNPOP
GNP Per Capita (US$)	*1997*	2,740	World Bank
GNP Per Capita Average Annual Growth Rate	*1996-1997*	-2.1	World Bank
Human Development Index Rank (HDI)	*1999*	67	UNDP
% Population Economic Active		55.3	ILO
Unemployment Rate	*1997*	0.9	ILO
Total Adult Literacy Rate	*1995*	94	UNESCO
Adult Male Literacy Rate	*1995*	96	UNESCO
Adult Female Literacy Rate	*1995*	92	UNESCO
Male Secondary School Enrollment Ratio	*1996*	57.5	UNESCO
Female Secondary School Enrollment Ratio	*1996*	56.5	UNESCO
Crude Birth Rate (births per 1,000 pop.)	*1999*	16	UNPOP
Crude Death Rate (deaths per 1,000 pop.)	*1999*	7	UNPOP
Maternal Mortality Rate (per 100,000 live births)	*1990*	200	WHO
Life Expectancy at Birth	*1998*	69	UNPOP
Total Fertility Rate	*1998*	1.7	UNPOP
Infant Mortality Rate (per 1,000 live births)	*1999*	28	UNICEF/UNPOP

UNAIDS/WHO Working Group on Global HIV/AIDS and STI Surveillance

Global Surveillance of HIV/AIDS and sexually transmitted infections (STIs) is a joint effort of WHO and UNAIDS. The UNAIDS/WHO Working Group on Global HIV/AIDS and STI Surveillance, initiated in November 1996, guides respective activities. The primary objective of the working group is to strengthen national, regional and global structures and networks for improved monitoring and surveillance of HIV/AIDS and STIs. For this purpose, the working group collaborates closely with national AIDS programmes and a number of national and international experts and institutions. The goal of this collaboration is to compile the best information available and to improve the quality of data needed for informed decision-making and planning at national, regional and global levels. The Epidemiological Fact Sheets are one of the products of this close and fruitful collaboration across the globe.

The working group and its partners have established a framework standardizing the collection of data deemed important for a thorough understanding of the current status and trends of the epidemic, as well as patterns of risk and vulnerability in the population. Within this framework, the Fact Sheets collate the most recent country-specific data on HIV/AIDS prevalence and incidence, together with information on behaviours (e.g casual sex and condom use) which can spur or stem the transmission of HIV.

Not unexpectedly, information on all of the agreed-upon indicators was not available for many countries in 1999. However, these updated Fact Sheets do contain a wealth of information which allows identification of strengths in currently existing programmes and comparisons between countries and regions. The Fact Sheets may also be instrumental in identifying potential partners when planning and implementing improved surveillance systems.

The fact sheets can be only as good as information made available to the UNAIDS/WHO Working Group on Global HIV/AIDS and STI Surveillance. Therefore, the working group would like to encourage all programme managers as well as national and international experts to communicate additional information to the working group whenever such information becomes available. The working group also welcomes any suggestions for additional indicators or information proven to be useful in national or international decision-making and planning.

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Estimated number of people living with HIV/AIDS

In 1999 and during the first quarter of 2000, UNAIDS and WHO worked closely with national governments and research institutions to recalculate current estimates on people living with HIV/AIDS. These calculations are based on the previously published estimates for 1997 and recent trends in HIV/AIDS surveillance in various populations. A methodology developed in collaboration with an international group of experts was used to calculate the new estimates on prevalence and incidence of HIV and AIDS deaths, as well as the number of children infected through mother-to-child transmission of HIV. Different approaches were used to estimate HIV prevalence in countries with low-level, concentrated or generalized epidemics. The current estimates do not claim to be an exact count of infections. Rather, they use a methodology that has thus far proved accurate in producing estimates that give a good indication of the magnitude of the epidemic in individual countries. However, these estimates are constantly being revised as countries improve their surveillance systems and collect more information.

Adults in this report are defined as women and men aged 15 to 49. This age range covers people in their most sexually active years. While the risk of HIV infection obviously continues beyond the age of 50, the vast majority of those who engage in substantial risk behaviours are likely to be infected by this age. The 15 to 49 age range was used as the denominator in calculating adult HIV prevalence.

❑ Estimated number of adults and children living with HIV/AIDS, end of 1999

These estimates include all people with HIV infection, whether or not they have developed symptoms of AIDS, alive at the end of 1999:

Adults and children	**755000**		
Adults (15-49)	**740000**	**Adult rate (%)**	**2.15**
Women (15-49)	**305000**		
Children (0-15)	**13900**		

❑ Estimated number of deaths due to AIDS

Estimated number of adults and children who died of AIDS during 1999:

Deaths in 1999	**66000**

❑ Estimated number of orphans

Estimated number of children who have lost their mother or both parents to AIDS (while they were under the age of 15) since the beginning of the epidemic:

Cumulative orphans	**75000**

Estimated number of children who have lost their mother or both parents to AIDS and who were alive and under age 15 at the end of 1999:

Current living orphans

Assessment of epidemiological situation – Thailand

HIV prevalence in Thailand was first detected in the late-1980s. Sentinel Surveillance was started in 14 provinces in 1989 and in all 73 provinces by 1990. This included blood donors, antenatal clinic attendees, IV drug users, male STD clinic patients, and female sex workers both in brothels (direct) and in massage parlors and other places (indirect). In Bangkok, in late 1987, one percent of IV drug users were HIV positive. By the end of 1988, that rate had increased to 30 percent. Since 1988, HIV prevalence among IV drug users tested has remained between 20 and 45 percent both in and outside of Bangkok. In Bangkok, HIV prevalence among sex workers tested (both direct and indirect combined) has ranged from 7 to 18 percent between 1990 and 1996. Since 1994, HIV prevalence in this group has declined slightly from 13 percent to 7 percent in 1997. Outside of Bangkok, HIV prevalence among sex workers tested (both direct and indirect) increased from 5 percent to 20 percent. HIV prevalence rates are highest in the northern provinces ranging from 16 to 57 percent among direct sex workers. HIV prevalence among male STD clinic patients tested in Bangkok increased from 3 percent in 1990 to 10 percent in 1994. In 1997, 7 percent of male STD clinic patients tested in Bangkok were HIV positive. Outside of Bangkok, HIV prevalence among male STD clinic patients tested increased from 3 percent to 9 percent between 1990 and 1996. In 1997, the median rate decreased to 7 percent. Again, there is a significant north-south gradient with HIV prevalence over 40 percent among male STD clinic patients in the northern-most provinces.

Among antenatal clinic attendees tested in Bangkok, HIV prevalence increased from 0.2 percent in 1990 to 2 percent in 1994. In 1997, 1 percent of antenatal clinic women tested were HIV positive. Outside of Bangkok, HIV prevalence among antenatal clinic attendees increased from no infection detected in 1990 to two percent in 1994. HIV prevalence among this group has reached as high as 10 percent in provinces in the north. The median HIV prevalence among antenatal clinic attendees, however, remained around two percent in 1997.

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HIV sentinel surveillance

This section contains information about HIV prevalence in different populations. The data reported in the tables below are mainly based on the HIV data base maintained by the United States Bureau of the Census where data from different sources, including national reports, scientific publications and international conferences is compiled. To provide for a simple overview of the current situation and trends over time, summary data are given by population group, geographical area (Major Urban Areas versus Outside Major Urban Areas), and year of survey. Studies conducted in the same year are aggregated and the median prevalence rates (in percentages) are given for each of the categories. The maximum and minimum prevalence rates observed, as well as the total number of surveys/sentinel sites, are provided with the median, to give an overview of the diversity of HIV-prevalence results in a given population within the country. Data by sentinel site or specific study on which the medians were calculated are printed at the end of this fact sheet.

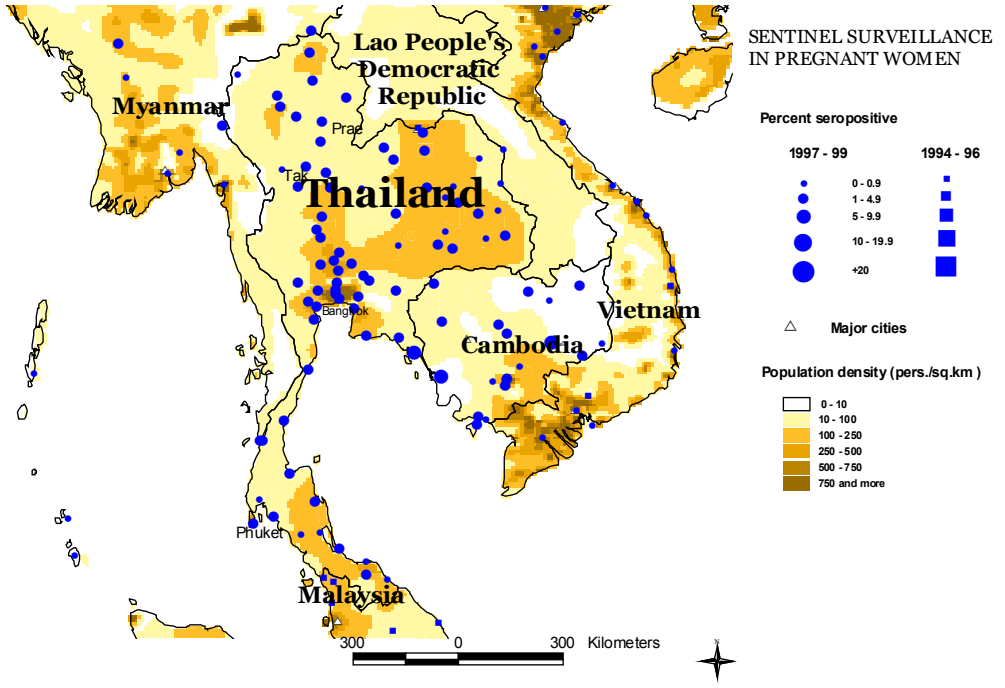
The differentiation between the two geographical areas Major Urban Areas and Outside Major Urban Areas is not based on strict criteria, such as the number of inhabitants. For most countries, Major Urban Areas were considered to be the capital city and – where applicable – other metropolitan areas with similar socio-economic patterns. The term Outside Major Urban Areas considers that most sentinel sites are not located in strictly rural areas, even if they are located in somewhat rural districts.

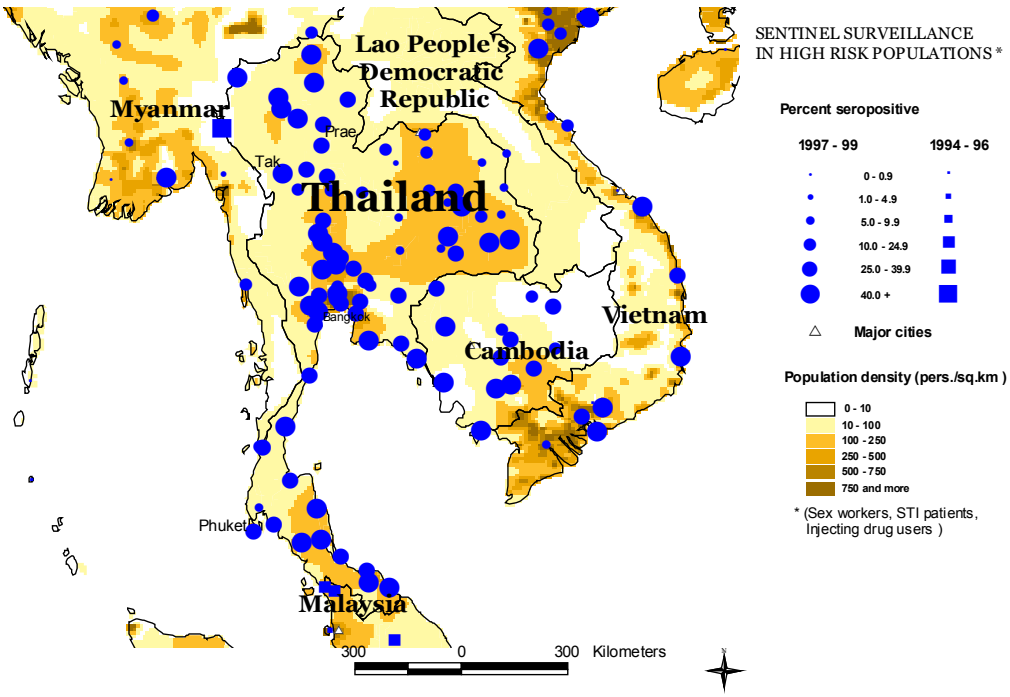
❑ **HIV prevalence in selected populations in percent** (for blood donors: 1/100 000)

Group	Area		1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
Pregnant women	Major Urban Areas	N-sites							1	1	1		1	1	1	1		
		Minimum							0.2	0.57	1.21		1.88	1.93	1.72	1.28		
		Median							0.2	0.57	1.21		1.88	1.93	1.72	1.28		
		Maximum							0.2	0.57	1.21		1.88	1.93	1.72	1.28		
Pregnant women	Outside Major Urban Areas	N-sites														75		
		Minimum														0		
		Median														1.71		
		Maximum														5.5		
Group	Area		1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
Sex workers	Major Urban Areas	N-sites							1	1	1	1	1	1	1	1		
		Minimum							9.7	7.46	17.82	8.59	13	9.61	6.89	13.02		
		Median							9.7	7.46	17.82	8.59	13	9.61	6.89	13.02		
		Maximum							9.7	7.46	17.82	8.59	13	9.61	6.89	13.02		
Sex workers	Outside Major Urban Areas	N-sites														58		
		Minimum														0		
		Median														25.81		
		Maximum														57.14		
Group	Area		1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
Injecting drug users	Major Urban Areas	N-sites				1	1	1	1	1	1	1	1	1	1	1		
		Minimum				1	20.2	39	36.7	45	41	23.06	37.5	31.36	31.43	33.11		
		Median				1	20.2	39	36.7	45	41	23.06	37.5	31.36	31.43	33.11		
		Maximum				1	20.2	39	36.7	45	41	23.06	37.5	31.36	31.43	33.11		
Injecting drug users	Outside Major Urban Areas	N-sites														53		
		Minimum														0		
		Median														41.425		
		Maximum														100		
Group	Area		1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
STI patients	Major Urban Areas	N-sites							1	1	1	1	1	1	1	1		
		Minimum							2.6	5.57	8.68	8.77	9.88	8.17	6.88	6.79		
		Median							2.6	5.57	8.68	8.77	9.88	8.17	6.88	6.79		
		Maximum							2.6	5.57	8.68	8.77	9.88	8.17	6.88	6.79		
STI patients	Outside Major Urban Areas	N-sites														67		
		Minimum														0		
		Median														6.67		
		Maximum														58.33		
Group	Area		1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
Blood Donors	National	N-sites																
		Minimum																
		Median																
		Maximum																
Blood Donors	Major Urban Areas	N-sites																
		Minimum																
		Median																
		Maximum																
Group	Area		1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
Men having sex with men	Major Urban Areas	N-sites																
		Minimum																
		Median																
		Maximum																

Maps of HIV sentinel sites

Mapping the geographical distribution of HIV sentinel sites for different population groups may assist interpreting both the national coverage of the HIV surveillance system and explaining differences in levels and trends of prevalence. The UNAIDS/WHO Working Group on Global HIV/AIDS and STI Surveillance, in collaboration with the UNICEF/WHO HealthMap Programme, has produced maps showing the location and HIV prevalence of HIV sentinel sites in relation to population density, major urban areas and communication routes. Maps illustrate separately the most recent results from HIV sentinel surveillance in pregnant women and in sub-populations at higher risk of HIV infection.





The boundaries and names shown and the designations used on these maps do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.
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Reported AIDS cases

AIDS cases by year of reporting

1979	1980	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	Total	Unkn
0	0	0	0	0	0	1	1	7	10	39	107	453	1466	5713	12807	18890	23664	26000	25847	13601	128606	

Date of last report: 31-10-1999

Following WHO and UNAIDS recommendations, AIDS case reporting is carried out in most countries. Data from individual AIDS cases is aggregated at the national level and sent to WHO. However, case reports come from surveillance systems of varying quality. Reporting rates vary substantially from country to country and low reporting rates are common in developing countries due to weaknesses in the health care and epidemiological systems. In addition, countries use different AIDS case definitions. A main disadvantage of AIDS case reporting is that it only provides information on transmission patterns and levels of infection approximately 5-10 years in the past, limiting its usefulness for monitoring recent HIV infections.

Despite these caveats, AIDS case reporting remains an important advocacy tool and is useful in estimating the burden of HIV-related morbidity as well as for short-term planning of health care services. AIDS case reports also provide information on the demographic and geographic characteristics of the affected population and on the relative importance of the various exposure risks. In some situations, AIDS reports can be used to estimate earlier HIV infection patterns using back-calculation. AIDS case reports and AIDS deaths have been dramatically reduced in industrialized countries with the introduction of HAART (Highly Active Anti-Retroviral Therapy).

Aids cases by age and sex

Sex	Age	<96	1996	1997	1998	1999	Unkn.	Total	%
All	All	39494	23664	26000	25847			115005	100.0
	0-4	2250	1055	1097	840			5242	4.6
	5-9	66	95	177	200			538	0.5
	10-14	12	2	15	11			40	0.0
	15-19	512	264	258	197			1231	1.1
	20-24	5509	3006	2868	2723			14106	12.3
	25-29	11119	6948	7615	7232			32914	28.6
	30-34	8627	5517	6341	6653			27138	23.6
	35-39	5449	3304	3652	3949			16354	14.2
	40-44	2577	1663	2053	2076			8369	7.3
	45-49	1372	857	916	972			4117	3.6
	50-54	736	386	430	448			2000	1.7
	55-59	545	276	274	222			1317	1.1
	60+	666	287	302	321			1576	1.4
	NS	54	4	2	3			63	0.1
Male	All	33248	18924	19961	19213			91346	100.0
	0-4	1187	561	591	465			2804	3.1
	5-9	36	65	107	97			305	0.3
	10-14	6	1	9	3			19	0.0
	15-19	257	110	107	89			563	0.6
	20-24	4131	1951	1651	1469			9202	10.1
	25-29	9743	5687	5902	5283			26615	29.1
	30-34	7639	4732	5251	5369			22991	25.2
	35-39	4896	2856	3048	3222			14022	15.4
	40-44	2333	1405	1701	1651			7090	7.8
	45-49	1224	738	735	771			3468	3.8
	50-54	653	330	374	347			1704	1.9
	55-59	489	234	226	173			1122	1.2
	60+	608	251	257	271			1387	1.5
	NS	46	3	2	3			54	0.1
Female	All	6246	4740	6039	6634			23659	100.0
	0-4	1063	494	506	375			2438	10.3
	5-9	30	30	70	103			233	1.0
	10-14	6	1	6	8			21	0.1
	15-19	255	154	151	108			668	2.8
	20-24	1378	1055	1217	1254			4904	20.7
	25-29	1376	1261	1713	1949			6299	26.6
	30-34	988	785	1090	1284			4147	17.5
	35-39	553	448	604	727			2332	9.9
	40-44	244	258	352	425			1279	5.4
	45-49	148	119	181	201			649	2.7
	50-54	83	56	56	101			296	1.3
	55-59	56	42	48	49			195	0.8
	60+	58	36	45	50			189	0.8
	NS	8	1	0	0			9	0.0
NS	All								
	0-4								
	5-9								
	10-14								
	15-19								
	20-24								
	25-29								
	30-34								
	35-39								
	40-44								
	45-49								
	50-54								
	55-59								
	60+								
	NS								

AIDS cases by mode of transmission

Hetero: Heterosexual contacts.
Homo/Bi: Homosexual contacts between men.
IDU: Injecting drug use. This transmission category also includes cases in which other high-risk behaviours were reported, in addition to injection of drugs.
Blood: Blood and blood products.
Perinatal: Vertical transmission during pregnancy, birth or breastfeeding.
NS: Not specified/unknown.

Sex	Trans. Group	<96	1996	1997	1998	1999	Unkn	Total	%
All	Total	3916	2342	2575	2550			11384	100.0
	Hetero	3025	1949	2153	2113			9241	81.2
	Homo/Bi	422	321	275	252			1270	1.1
	IDU	2769	1068	1042	1145			6024	5.3
	Blood	44	0	4	1			49	0.0
	Perinatal	2313	1148	1268	1033			5762	5.1
	Other Known	3	1	2	5			11	0.0
	Unknown	3355	1396	1624	1936			8311	7.3
Male	Total	3295	1870	1974	1894			9034	100.0
	Hetero	2566	1549	1641	1541			7298	80.8
	Homo/Bi	422	321	275	252			1270	1.4
	IDU	2722	1044	1010	1124			5900	6.5
	Blood	28	0	3	0			31	0.0
	Perinatal	1224	624	691	559			3098	3.4
	Other Known	3	1	2	3			9	0.0
	Unknown	2891	1219	1344	1591			7045	7.8
Female	Total	6214	4722	6011	6556			2350	100.0
	Hetero	4598	3997	5121	5713			1942	82.7
	IDU	47	24	32	21			124	0.5
	Blood	16	0	1	1			18	0.1
	Perinatal	1089	524	577	474			2664	11.3
	Other Known	0	0	0	2			2	0.0
	Unknown	464	177	280	345			1266	5.4
NS	Total								
	Hetero								
	IDU								
	Blood								
	Perinatal								
	Other Known								
	Unknown								

Curable Sexually Transmitted Infections (STIs)

The predominant mode of transmission of both HIV and other STIs is sexual intercourse. Measures for preventing sexual transmission of HIV and STI are the same, as are the target audiences for interventions. In addition, strong evidence supports several biological mechanisms through which STI facilitate HIV transmission by increasing both HIV infectiousness and HIV susceptibility. Significant also is the observation of a sharp decline in the concentration of HIV in the genital secretions when the infection is treated. Monitoring trends in STI can provide valuable information on the sexual transmission of HIV as well as the impact of behavioural interventions, such as promotion of condom use.

Clinical services offering STI care are an important access point for people at high risk for both AIDS and STI, not only for diagnosis and treatment but also for information and education. Therefore, control and prevention of STI have been recognized as a major strategy in the prevention of HIV infection and ultimately AIDS. One of the cornerstones of STI control is adequate management of patients with symptomatic STIs. This includes diagnosis, treatment and individual health education and counselling on disease prevention and partner notification. Consequently, monitoring different components of STI control can also provide information on HIV prevention within a country.

❑ **Estimated incidence and prevalence of curable STIs**

	Incidence				Prevalence			
STI's	Year	Male	Female	All	Year	Male	Female	All
Chlamydia trach.								
Gonorrhoea								
Syphilis								
Trichomonas								

Comments:
Source:

❑ **STI Incidence, men**

Prevention Indicator 9: Proportion of men aged 15-49 years who reported episodes of urethritis in the last 12 months.

Year	Area	Age	Rate	N=

Comments:
Sources:

❑ **STI Prevalence, women**

Prevention Indicator 8: Proportion of pregnant women aged 15-24 years attending antenatal clinics whose blood has been screened with positive serology for syphilis.

Year	Area	Age	Rate	N=

Comments:
Sources:

❑ **STI Case management (counselled)**

Prevention Indicator 7: Proportion of people presenting with STI or for STI care in health facilities who received basic advice on condoms and on partner notification.

Year	Area	Age	Rate	N=

Comments:
Sources:

❑ **STI Case management (treatments)**

Prevention Indicator 6: Proportion of people presenting with STI in health facilities assessed and treated in an appropriate way (according to national standards).

Year	Area	Age	Rate	N=

Comments:
Sources:

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Health service indicators

HIV prevention strategies depend on the twin efforts of care and support for those living with HIV or AIDS, and targeted prevention for all people at risk or vulnerable to the infection. These efforts may range from reaching out to vulnerable communities through large-scale educational campaigns or interpersonal communication; provision of treatment for STIs; distribution of condoms and needles; creating and enabling environment to reduce risky behaviour; providing access to voluntary testing and counselling; home or institutional care for persons with symptomatic HIV infection; and preventing perinatal transmission and transmission through infected needles or blood in health care settings. It is difficult to capture such a large range of activities with one or just a few indicators. However, a set of well-established health care indicators – such as the percentage of a population with access to health care services; the percentage of women covered by antenatal care; or the percentage of immunized children – may help to identify general strengths and weaknesses of health systems. Specific indicators, such as access to testing and blood screening for HIV, help to measure the capacity of health services to respond to HIV/AIDS – related issues.

❑ Access to health care

Indicators	Year	Estimate	Source
% of population with access to health services – total:			
% of population with access to health services – urban:			
% of population with access to health services – rural:			
Contraceptive prevalence rate (%):	1990-1999	74	UNICEF/UNPOP
% of births attended by trained health personnel:	1990-1999	71	UNICEF
% of 1-yr-old children fully immunized – DPT:	1995-1998	94	UNICEF
% of 1-yr-old children fully immunized – Polio:	1995-1998	94	UNICEF
% of 1-yr-old children fully immunized – Measles:	1995-1998	91	UNICEF
Proportion of blood donations tested:			
% of ANC clinics where HIV testing is available:			
HIV/AIDS Hospital Occupancy Rate (Days):			

Male and female condoms are the only technology available that can prevent sexual transmission of HIV and other STIs. Persons exposing themselves to the risk of sexual transmission of HIV should have consistent access to high quality condoms. AIDS Programmes implement activities to increase both availability of and access to condoms. The two condom availability indicators below are intended to highlight areas of strength and weakness at the beginning and end of the distribution system so that programmatic resources can be directed appropriately to problem areas.

❑ Condom availability (central level)

Prevention Indicator 2: Availability of condoms in the country over the last 12 months (central level).

Year	Area	N	Rate

Comments:
Sources:

❑ Condom availability (peripheral level)

Prevention Indicator 3: Proportion of people who can acquire a condom (peripheral level).

Year	Area	N	Rate

Comments:
Sources:

Knowledge and behaviour

In most countries the HIV epidemic is driven by behaviours (e.g.: multiple sexual partners, intravenous drug use) that expose individuals to the risk of infection. Information on knowledge and on the level and intensity of risk behaviour related to HIV/AIDS is essential in identifying populations most at risk for HIV infection and in better understanding the dynamics of the epidemic. It is also critical information in assessing changes over time as a result of prevention efforts. One of the main goals of the 2nd generation HIV surveillance systems is the promotion of regular behavioural surveys in order to monitor trends in behaviours and target interventions.

❑ Knowledge of HIV- related preventive practices

Prevention Indicator 1: Proportion of people citing at least two acceptable ways of protection from HIV infection.

Year	Area	Age Group	Male	Female	All

Comments:
Sources:

❑ Reported non-regular sexual partnerships

Prevention Indicator 4: Proportion of sexually active people having at least one sex partner other than a regular partner in the last 12 months.

Year	Area	Age Group	Male	Female	All
1990	All	15-19	88.2	15.4	
1990	All	15-49	7.4	3.1	
1990	All	20-24	56.1	4.9	
1990	All	25-39	26.8	2.3	
1990	All	40-49	15.2	1.1	

Comments:
Sources: KABP/Behavioural Studies – GPA, 1992

❑ Reported condom use in risk sex (gen pop)

Prevention Indicator 5: Proportion of people reporting the use of a condom during the most recent intercourse of risk.

Year	Area	Age Group	Male	Female	All

Comments:
Sources:

Knowledge and behaviour

❑ Ever use of condom

Percentage of people who ever used a condom.

Year	Area	Age Group	Male	Female	All

Comments:
Sources:

❑ Median age at first sexual experience

Median age of people at which they first had sexual intercourse.

Year	Area	Age Group	Male	Female	All
1987	All	20-24		21.0	
1987	All	45-49		19.7	

Comments:
Sources: KABP/Behavioural Studies – GPA, 1992

❑ Adolescent pregnancy

Percentage of teenagers 15-19 who are mothers or pregnant with their first child.

Year	Area	Age Group	Rate	N

Comments:
Sources:

❑ Proportion of people ever having had sex with same sex

Year	Area	Age Group	Rate	N

Comments:
Sources:

❑ Reported non-regular sexual partnerships (MSM)

Year	Area	Age Group	Rate	N

Comments:
Sources:

Sources

Data presented in this Epidemiological Fact Sheet come from several different sources, including global, regional and country reports, published documents and articles, posters and presentations at international conferences, and estimates produced by UNAIDS, WHO and other United Nations Agencies. This section contains a list of the more relevant sources used for the preparation of the Fact Sheet. Where available, it also lists selected national Web sites where additional information on HIV/AIDS and STI are presented and regularly updated. However, UNAIDS and WHO do not warrant that the information in these sites is complete and correct and shall not be liable whatsoever for any damages incurred as a result of their use.

Kitsiriporchai, A., C. J. Mason, L. E. Markowitz, et al., 1995, HIV-1 Infection in Young Men Entering the Royal Thai Army.... Third International Conference on AIDS in Asia and the Pacific, Chiang Mai, Thailand, 9/17-21, Session B201.

Mason, C. J., L. E. Markowitz, S. Kitsiripornchai, et al., 1995, Declining Prevalence of HIV 1 Infection in young Thai Men, AIDS, vol. 9, no. 9, pp. 1061 1065.

Sirisopana, N., K. Torugsa, J. Carr, et al., 1993, Prevalence of HIV 1 Infection in Young Men Entering the Royal Thai Army, IX International Conference on AIDS, Berlin, 6/6 11, Poster PO C08 2778.

Thongcharoen, P., C. Wasi, S. Louisirirotchanakul, et al., 1989, Human Immunodeficiency Virus Infection in Thailand, Human Immunodeficiency Virus Infection in Thailand, Mahidol University, Bangkok, ISBN 974 586 526 5.

Thailand Ministry of Public Health, 1991, National Sentinel Surveillance Survey, unpublished tables.

Thailand Ministry of Public Health, 1991, National Sentinel Seroprevalence Survey, Oct. 28, unpublished tables.

Thailand Ministry of Public Health, 1992, National Sentinel Seroprevalence, June, unpublished tables.

Thailand Ministry of Public Health, 1993, National Sentinel Seroprevalence, June, unpublished tables.

Thailand Ministry of Public Health, 1994, National Sentinel Surveillance, June, unpublished tables.

Thailand Ministry of Public Health, 1995, National Sentinel Surveillance, June, unpublished tables.

Thailand Ministry of Public Health, 1996, National Sentinel Surveillance, June, unpublished tables.

Thailand Division of Epidemiology, MOPH. Number of AIDS Patients up to September 30, 1997.

Websites:

Ministry of Public Health (Thai only): http://www.moph.go.th/

Annex: HIV Surveillance data by site

Group	Area		1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
Pregnant women	Major Urban Areas	CR, Bangkok							0.2	0.57	1.21		1.88	1.93	1.72	1.28		
Pregnant women	Outside Major Urban Areas	CR, Angthong														2.44		
		CR, Ayuthaya														1.33		
		CR, Chacherngsao														1.26		
		CR, Chainart														2.48		
		CR, Chantaburi														3.5		
		CR, Chonburi														3.01		
		CR, Kanchanaburi														2.59		
		CR, Lopburi														1.71		
		CR, Nakhorn Nayok														2.37		
		CR, Nakornpathom														2.44		
		CR, Nonthaburi														1.27		
		CR, Pathumthani														1.27		
		CR, Petchburi														2.53		
		CR, Prachinburi														3		
		CR, Prachuabkirikhan														1.26		
		CR, Ratchburi														1.92		
		CR, Rayong														3.71		
		CR, Sakaew														1.49		
		CR, Samutprakarn														1.41		
		CR, Samutsakorn														1.29		
		CR, Samutsongkhram														1.65		
		CR, Saraburi														2.09		
		CR, Singburi														0.9		
		CR, Suphanburi														3.11		
		CR, Trat														5.5		
		NER, Amnartcharoen														0.94		
		NER, Burirum														2.44		
		NER, Chaiyaphum														1.31		
		NER, Kalasin														0.72		
		NER, Khonkaen														1.26		
		NER, Loei														2		
		NER, Mahasarakham														0.82		
		NER, Mukdaharn														0.27		
		NER, Nakhom Ratchasima														0.93		
		NER, Nakornphanom														0.8		
		NER, Nongbua Lamphu														1.74		
		NER, Nongkhai														1.86		
		NER, Roi Et														1.91		
		NER, Sakonnakorn														0.89		
		NER, Sisaket														0.49		
		NER, Surin														1.4		
		NER, Ubonratchthani														1.97		
		NER, Udornthani														1.39		
		NER, Yasothorn														1.26		
		NR, Chiangmai														4.99		
		NR, Chiangrai														5		
		NR, Kampaenpetch														1.73		
		NR, Lampang														3.09		
		NR, Lampun														3.03		
		NR, Maehongsom														0		
		NR, Nakornsawan														1.06		
		NR, Nan														1.95		
		NR, Petchabun														0.95		
		NR, Phayao														4.86		
		NR, Phichit														1.46		
		NR, Pisanulok														1.41		
		NR, Prae														1.36		
		NR, Sukhothai														1.76		
		NR, Tak														0.68		
		NR, Utaradit														2.34		
		NR, Uthaithani														1.81		
		SR, Chumphom														2.51		
		SR, Krabi														2.55		
		SR, Nakornsithammar														1.83		
		SR, Narathiwat														0.87		
		SR, Pattani														0.62		
		SR, Phang-nga														0.86		
		SR, Phattalung														0.81		
		SR, Phuket														2.09		
		SR, Ranong														2.17		
		SR, Satul														0.43		
		SR, Songkhla														2.53		
		SR, Suratthani														2.16		
		SR, Trang														0.28		
		SR, Yala														1.51		
Group	Area		1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
Sex workers	Major Urban Areas	CR, Bangkok							9.7	7.46	17.82	8.59	13	9.61	6.89	13.02		
Sex workers	Outside Major Urban Areas	CR, Angthong																
		CR, Ayuthaya														28.32		
		CR, Chacherngsao														22.43		
		CR, Chainart														19.48		
		CR, Chantaburi																

Annex: HIV Surveillance data by site contd

		CR, Chonburi													10.32		
		CR, Kanchanaburi													33.61		
		CR, Lopburi													25		
		CR, Nakhorn Nayok													30		
		CR, Nakornpathom													32.99		
		CR, Nonthaburi															
		CR, Pathumthani													20.86		
		CR, Petchburi															
		CR, Prachinburi													14.65		
		CR, Prachuabkirikhan													27.5		
		CR, Ratchburi													30.97		
		CR, Rayong													33		
		CR, Sakaew													31.82		
		CR, Samutprakarn													24.51		
		CR, Samutsakorn													36.36		
		CR, Samutsongkhram													22.22		
		CR, Saraburi													27.72		
		CR, Singburi													26.47		
		CR, Suphanburi													21.43		
		CR, Trat													53.85		
		NER, Amnartcharoen															
		NER, Burirum															
		NER, Chaiyaphum															
		NER, Kalasin													33.33		
		NER, Khonkaen													22		
		NER, Loei													18.6		
		NER, Mahasarakham															
		NER, Mukdaharn															
		NER, Nakhom Ratchasima													9.38		
		NER, Nakornphanom															
		NER, Nongbua Lamphu															
		NER, Nongkhai													21.33		
		NER, Roi Et															
		NER, Sakonnakorn													0		
		NER, Sisaket															
		NER, Surin													25.81		
		NER, Ubonratchthani													42.86		
		NER, Udornthani													18.13		
		NER, Yasothorn													4.17		
		NR, Chiangmai													30.77		
		NR, Chiangrai													35.42		
		NR, Kampaenpetch													20		
		NR, Lampang													49.49		
		NR, Lampun													53.27		
		NR, Maehongsom															
		NR, Nakornsawan													29.13		
		NR, Nan													28.07		
		NR, Petchabun													20.79		
		NR, Phayao													57.14		
		NR, Phichit													16.35		
		NR, Pisanulok													28.57		
		NR, Prae													31.58		
		NR, Sukhothai													36.23		
		NR, Tak															
		NR, Utaradit													33.93		
		NR, Uthaithani													20		
		SR, Chumphom													31.25		
		SR, Krabi													14.56		
		SR, Nakornsithammar													15.69		
		SR, Narathiwat															
		SR, Pattani													32		
		SR, Phang-nga													8.06		
		SR, Phattalung													0		
		SR, Phuket													33.16		
		SR, Ranong															
		SR, Satul															
		SR, Songkhla													21.14		
		SR, Suratthani													14.29		
		SR, Trang													13.33		
		SR, Yala													15.92		
Group	Area		1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
Injecting drug users	Major Urban Areas	CR, Bangkok				1	20.2	39	36.7	45	41	23.06	37.5	31.36	31.43	33.11		
Injecting drug users	Outside Major Urban Areas	CR, Angthong														46.15		
		CR, Ayuthaya														70.97		
		CR, Chacherngsao														35.64		
		CR, Chainart														44.44		
		CR, Chantaburi														30.77		
		CR, Chonburi														40.28		
		CR, Kanchanaburi														75		
		CR, Lopburi														27.08		
		CR, Nakhorn Nayok																
		CR, Nakornpathom														0		
		CR, Nonthaburi														43.33		
		CR, Pathumthani																

Annex: HIV Surveillance data by site contd

		CR, Petchburi													35.29		
		CR, Prachinburi													25		
		CR, Prachuabkirikhan													34		
		CR, Ratchburi													83.33		
		CR, Rayong													57.14		
		CR, Sakaew															
		CR, Samutprakarn													33.04		
		CR, Samutsakorn													42.5		
		CR, Samutsongkhram													42.11		
		CR, Saraburi													38.46		
		CR, Singburi													87.5		
		CR, Suphanburi													63.64		
		CR, Trat													56.25		
		NER, Amnartcharoen															
		NER, Burirum															
		NER, Chaiyaphum															
		NER, Kalasin															
		NER, Khonkaen													15.79		
		NER, Loei													14.29		
		NER, Mahasarakham															
		NER, Mukdaharn															
		NER, Nakhom Ratchasima													0		
		NER, Nakornphanom															
		NER, Nongbua Lamphu															
		NER, Nongkhai															
		NER, Roi Et													100		
		NER, Sakonnakorn															
		NER, Sisaket													40.74		
		NER, Surin															
		NER, Ubonratchthani													20		
		NER, Udornthani															
		NER, Yasothorn															
		NR, Chiangmai													47.67		
		NR, Chiangrai													53.85		
		NR, Kampaenpetch													23.81		
		NR, Lampang													45.61		
		NR, Lampun															
		NR, Maehongsom													50		
		NR, Nakornsawan													11.11		
		NR, Nan													35		
		NR, Petchabun													0		
		NR, Phayao															
		NR, Phichit															
		NR, Pisanulok															
		NR, Prae															
		NR, Sukhothai													0		
		NR, Tak													52.94		
		NR, Utaradit															
		NR, Uthaithani													50		
		SR, Chumphom													61.11		
		SR, Krabi													31.82		
		SR, Nakornsithammar													58.9		
		SR, Narathiwat													46.26		
		SR, Pattani													16.67		
		SR, Phang-nga															
		SR, Phattalung													78.95		
		SR, Phuket													40		
		SR, Ranong													40		
		SR, Satul													51.11		
		SR, Songkhla													33.99		
		SR, Suratthani													31.63		
		SR, Trang													67.95		
		SR, Yala													80		
Group	Area		1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
STI patients	Major Urban Areas	CR, Bangkok							2.6	5.57	8.68	8.77	9.88	8.17	6.88	6.79		
STI Patients	Outside Major Urban Areas	CR, Angthong														0		
		CR, Ayuthaya														11		
		CR, Chacherngsao														6.67		
		CR, Chainart														14.29		
		CR, Chantaburi														23.88		
		CR, Chonburi														0		
		CR, Kanchanaburi														10.71		
		CR, Lopburi														0		
		CR, Nakhorn Nayok														0		
		CR, Nakornpathom														5		
		CR, Nonthaburi														2.86		
		CR, Pathumthani														13.33		
		CR, Petchburi														18.6		
		CR, Prachinburi																
		CR, Prachuabkirikhan														17.39		
		CR, Ratchburi														16		
		CR, Rayong														10		
		CR, Sakaew														1.75		
		CR, Samutprakarn														8.26		
		CR, Samutsakorn														17.95		
		CR, Samutsongkhram														0		

Annex: HIV Surveillance data by site contd

		CR, Saraburi													6.76		
		CR, Singburi															
		CR, Suphanburi													13.46		
		CR, Trat													2.7		
		NER, Amnartcharoen													7.14		
		NER, Burirum													6.67		
		NER, Chaiyaphum															
		NER, Kalasin													5.56		
		NER, Khonkaen													4		
		NER, Loei													4.76		
		NER, Mahasarakham													2		
		NER, Mukdaharn													0		
		NER, Nakhom Ratchasima													7		
		NER, Nakornphanom													7.69		
		NER, Nongbua Lamphu															
		NER, Nongkhai													8.33		
		NER, Roi Et													2.63		
		NER, Sakonnakorn													7.02		
		NER, Sisaket													2.5		
		NER, Surin													4		
		NER, Ubonratchthani													5.88		
		NER, Udornthani															
		NER, Yasothorn															
		NR, Chiangmai													18.81		
		NR, Chiangrai													15.63		
		NR, Kampaenpetch													4.65		
		NR, Lampang													5.83		
		NR, Lampun													6.67		
		NR, Maehongsom													0		
		NR, Nakornsawan													4		
		NR, Nan													20		
		NR, Petchabun													3.45		
		NR, Phayao													58.33		
		NR, Phichit													0		
		NR, Pisanulok													3.03		
		NR, Prae															
		NR, Sukhothai													9.52		
		NR, Tak													12.5		
		NR, Utaradit													0		
		NR, Uthaithani													3.85		
		SR, Chumphom													7.69		
		SR, Krabi													21.95		
		SR, Nakornsithammar													6.25		
		SR, Narathiwat													26.67		
		SR, Pattani													12		
		SR, Phang-nga															
		SR, Phattalung													13.33		
		SR, Phuket													10.53		
		SR, Ranong													0		
		SR, Satul													44.44		
		SR, Songkhla													8.08		
		SR, Suratthani													3.45		
		SR, Trang													4.35		
		SR, Yala													14.29		
Group	Area		1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
Blood Donors	National																	
Blood Donors	Major Urban Areas	CR, Bangkok														0.83		
Blood Donors	Outside Major Urban Areas	CR, Angthong														0		
		CR, Ayuthaya														0.37		
		CR, Chacherngsao														1.28		
		CR, Chainart														0		
		CR, Chantaburi														1.64		
		CR, Chonburi														0.43		
		CR, Kanchanaburi														0.63		
		CR, Lopburi														0.57		
		CR, Nakhorn Nayok														0.75		
		CR, Nakornpathom														1.13		
		CR, Nonthaburi																
		CR, Pathumthani														0		
		CR, Petchburi														1.73		
		CR, Prachinburi														0.85		
		CR, Prachuabkirikhan														2.46		
		CR, Ratchburi														0.56		
		CR, Rayong														1.13		
		CR, Sakaew														0.28		
		CR, Samutprakarn														1.77		
		CR, Samutsakorn														1.05		
		CR, Samutsongkhram														0.49		
		CR, Saraburi														0.5		
		CR, Singburi														0.66		
		CR, Suphanburi														0.98		

Annex: HIV Surveillance data by site contd

CR, Trat														0.52		
NER, Amnartcharoen														0.65		
NER, Burirum														0.44		
NER, Chaiyaphum														0.28		
NER, Kalasin														0.25		
NER, Khonkaen														0.5		
NER, Loei														0.77		
NER, Mahasarakham														0.18		
NER, Mukdahan														0.51		
NER, Nakhom Ratchasima														0.2		
NER, Nakornphanom														0.59		
NER, Nongbua Lamphu														0.58		
NER, Nongkhai														0.94		
NER, Roi Et														1.12		
NER, Sakonnakorn														0.26		
NER, Sisaket														0.3		
NER, Surin														0.42		
NER, Ubonratchthani														0.23		
NER, Udornthani														0.58		
NER, Yasothorn														0.36		
NR, Chiangmai														0.54		
NR, Chiangrai														2		
NR, Kampaenpetch														0.25		
NR, Lampang														0.59		
NR, Lampun														0.5		
NR, Maehongsom														1.06		
NR, Nakornsawan														1.48		
NR, Nan														0.34		
NR, Petchabun														0.3		
NR, Phayao														2.75		
NR, Phichit														0.17		
NR, Pisanulok														0.21		
NR, Prae														0.48		
NR, Sukhothai														0.3		
NR, Tak														0.92		
NR, Utaradit														0.58		
NR, Uthaithani														0		
SR, Chumphom														0.44		
SR, Krabi														0		
SR, Nakornsithammar														2.15		
SR, Narathiwat														2.17		
SR, Pattani														0.36		
SR, Phang-nga														0.7		
SR, Phattalung														0.61		
SR, Phuket														0.88		
SR, Ranong														1.29		
SR, Satul														1.23		
SR, Songkhla														0.47		
SR, Suratthani														0.37		
SR, Trang														0.64		
SR, Yala														1.28		